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REPORTS INVENTORY						DL NO.		
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		I-in report include	Form No.)		2. TYP	E STATIS	TICAL	
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3. FUNCTIONAL AREA 4. NO. OF COPIES PREPARED		PERSONNEL .	TRAINING			ADMIN. GENERAL		
		LOGISTICS	SECURITY		OTHER	OTHER (specify)		
		MEDICAL 5. FREQUENCY (week!		monthly, quarterly, etc.)		• DISTRIBUTION (No. of components not		
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7. FORMAT (memo	orandum, form	· · · · · · · · · · · · · · · · · · ·			RECTIVE AUTH	IVE AUTHORITY REQUIRING REPORT		
, , , , , ,	nt-out, etc)	YES IF YES GIVE ADP PROCESSING NO. unk			nknown	nown		
Memo	MPONENT (incl	ude lowest level	III. FEEDER R	EPORTS (State t	otal number	and identify	ov Title.	
contributing	information	to report)	Form No.	, or nomenciatu	re. Attach	separate shee	t if necessary.)	
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-			12. COST F	ACTORS				
		A. MANUAL			COSTS			
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B. COSTS OF COMPUTER PRODUCED REPORTS								
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13. COMPLETE DE	TALLED JUSTIEL	CATION FOR THIS REP	ORT (in addition	to directive	ar sutherit	cited in Item	OJ IE KNOWN	
INCLUDE DATE	REPORT WAS F	FIRST STARTED AND CO	MPONENT WHO ESTA	BLISHED REQUIR	EMENT.	r Cited In Item	1)/ IF KHOWN,	
	•	inform the Dir		s executive	staff of	the names	of	
individua	ls engaged	d as Agency co	nsultants.					
								
14. FUTURE GOALS								
GOAL PROPOSED BY COMPONENT FOR THIS REPORT RETAIN AS IS OTHER (explain)						ESTIMATED SAVINGS MAN-HOURS DOLLARS		
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I6. DATE OF INVENTORY Approved For Release 2006/11/13 : CIA-RDP75-00399R000100160066-8								
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